

REQUIRED INFORMATION
(ORS 249.031, PCC 2.08.070 & PCC 2.08.080)

OCCUPATION (Present Employment – Paid or Unpaid)

Executive Director, Evaluation and Development Institute (paid)

OCCUPATIONAL BACKGROUND (Previous Employment – Paid or Unpaid)

(Resume attached)

Executive Director, Evaluation & Development Institute 1997-Present

Evaluator, NWRZL 1993-1997

~~1991-1993~~ Coordinator, Western Michigan University 1991-1993

(See Resume for more)

*EXAMPLES: EXECUTIVE Director of the Ohio Developmental Disabilities Planning Council
Publisher of the Awesome Library Web site
Evaluation Manager for over 100 programs in education, health, justice, & welfare*

EDUCATIONAL BACKGROUND (Schools Attended; use attachment if needed)

Complete Name of School - <u>no acronyms</u>	Last grade level completed	Diploma/Degree/Certificate (AA, BA, BS, MA, PhD, etc...)	Course of study (optional)
<i>The Ohio State University</i>	<i>Doctoral</i>	<i>Ph.D.</i>	<i>Program evaluation</i>
<i>University of Texas, Austin</i>	<i>Bachelor</i>	<i>Bachelor (B.A.)</i>	<i>Psychology</i>
<i>University of Texas, Austin</i>	<i>-</i>	<i>-</i>	<i>Special Education (Orthopedics)</i>
<i>Chico State School</i>	<i>-</i>	<i>-</i>	<i>Psychology</i>
<i>Other: GRAND PRAIRIE High School</i>	<i>12</i>	<i>H.S. Diploma</i>	<i>✓</i>

PRIOR GOVERNMENTAL EXPERIENCE (Elected or Appointed)

*Appointed by Governor as Executive Director of the Ohio DD Planning Council
Appointed to a number of state and federal panels & boards (see resume)
2 number of*

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By signing this document, I hereby state:

THAT I shall accept the nomination for the office indicated above;

THAT I shall qualify for said office if elected: